



Arkansas Tobacco Settlement Commission

Quarterly Report

January 2004

Executive Summary:

The Arkansas Tobacco Settlement Commission (ATSC) continues to meet quarterly to oversee and assess the progress of the programs funded by the Tobacco Settlement Proceeds Act of 2000. The seven programs for which the Commission provides oversight, the intent of and funding allocation for each program and the recommendation for future appropriations will be detailed in the next biennial report due August 2004 to the Governor and General Assembly.

The Commission is currently in its second annual grant competition and is accepting applications until March 19, 2004. This year the Commission hopes to fund at least \$600,000 in Community Grants. We recently held our first grant writing workshop and had great success. With compressed video technology, we were able to make the workshop accessible to 126 interested applicants in nine different locations. This was made possible through support from the UAMS College of Public Health and the Arkansas AHEC Programs.

Summary reports for each program for the period October 2003 to December 2003 follow.

Arkansas Aging Initiative (AAI)

*a program of the Donald W. Reynolds
University of Arkansas for Medical Sciences*

Mission

- ??To improve the health of older Arkansans through interdisciplinary geriatric care and innovative education programs.
- ??To influence health policy affecting older adults.

Vision

- ??To be a leader in improving lives of older adults through healthcare and education.



Program Progress

The Arkansas Aging Initiative has continued to make strides in each region. The education reporting template has been developed with input from the central education leaders and the education directors across the state. During the last COA Education Director's meeting it was decided that all sites would choose one educational theme that they would develop programming and outcome measures around each year. Dementia was the theme upon which the group agreed for this year. Each site agreed to develop a piece of the programming.

Another exciting venture that was investigated this past quarter was participating in a program with the Federally Qualified Clinics called "Collaboratives". These are computerized clinical best practice guidelines which target specific diseases. It provides education on the computer program and on the guidelines while providing prompts and questions for clinicians during the treatment phase of chronic diseases. It also creates a database from which to evaluate outcomes and to target specific identified areas of opportunity. Several AAI members across the state attended a meeting regarding the Collaboratives in December and will give a report and recommendations to the AAI leadership groups early in 2004.

The Fort Smith area COA has hired a director, Reta Zabel, PhD. Dr. Zabel will be moving to Fort Smith from Conway and will begin her position January 2004. An education satellite of the Schmieding Center, located

In this report . . .

| | |
|------------------------------------|----|
| Executive Summary | 1 |
| Arkansas Aging Initiative | 1 |
| Arkansas Biosciences Institute | 5 |
| College of Public Health | 6 |
| Delta Area Health Education Center | 9 |
| ADH-Tobacco Prevention & Cessation | 11 |
| Medicaid Expansion Initiatives | 13 |
| Minority Health Initiatives | 14 |
| RAND Evaluation | 15 |

Arkansas Aging Initiative *continued*

in Bella Vista, had their grand opening in November, 2003 with over 300 people in attendance. Mt. Home, the other satellite of Schmieding, has opened a COA office on the Arkansas State University campus in Mt. Home and they are in the process of interviewing for a nurse educator. The COA satellite in West Memphis has begun active programming and the Crittenden Memorial Hospital states they have begun recruitment efforts for a geriatrician.

In November and December, presentations were made to national audiences relating the success of AAI. Dr. Claudia Beverly presented a poster to the American Academy of Nursing demonstrating the leadership roles nurses have assumed in creating a statewide infrastructure promoting healthy aging in older Arkansans. In November, Dr. Claudia Beverly, Robin McAtee, Dr. Ronni Chernoff, Dr. Alan Pirniquie and Dr. Larry Wright presented a symposium to the Geriatric Society of America in San Diego. Presented was an in-depth discussion illustrating the success of the AAI via effective collaboration between the state's only medical science campus, local communities and local and regional healthcare providers.

Goal 1: Interdisciplinary geriatric healthcare will positively impact health outcomes of older Arkansans .

Schmieding Senior Health Clinic in Springdale: The Senior Health Clinic at the Springdale location had 4,139 patient encounters during the October-December 2003 timeframe.

South Arkansas Center on Aging (SACOA) in El Dorado: The clinic continues to be busy with 2,382 visits to the clinic for September, October, November and December. Leadership at the Medical Center of South Arkansas along with their senior health clinic established a building committee in November with their first meeting in December. The plans are to have a larger senior health clinic within 2-3 years.

Texarkana Regional Center on Aging (TRCOA): The Senior Health Clinic saw 866 patients during October, November and December. Plans are on hold regarding the move of the SHC to the Center on Aging Site.

Center on Aging Northeast (COA Northeast) in Jonesboro: During September, October, November and December they had 1,873 patient encounters in their senior health clinic and a total of 22 encounters in their Memory Clinic.

South Central Center on Aging (SCCOA) in Pine Bluff: The senior health clinic has begun operations and saw a total of 175 during September, October, November and December.

Fort Smith Area Center on Aging: The Sparks Senior Health Clinic had a grand opening November 11, 2003 and had 153 patient encounters from November through December, 2003

Goal 2: Geriatric education will positively impact behaviors to improve health outcomes.

Schmieding Center for Senior Health and Education (SCSHE): In addition to the programming at the SCSHE, 2 Community Outreach programs in both Harrison and the Bella Vista/Rogers area will be reported on separately:

Schmieding

- ?? *Health Professional Education:* 1 program was offered in Washington County with a total of 32 attendees from both Washington and Benton Counties. There were 17 LPNs, 11 RNs, 1 APN, 1 PT/OT and 2 listed as other.
- ?? *Paraprofessional Education:* 6 programs were offered in Washington County with a total of 70 attendees from both Benton and Washington Counties.
- ?? *Community and Senior Education:* 12 programs were offered in Washington County with a total of 342 attendees from both Washington and Benton Counties. 1 program was offered in Benton County with a total of 9 attendees from Benton County.

Harrison

- ?? *Health Professional Education:* 3 programs were offered in Boone County with a total of 51 professionals attending. These included: 1 speech therapist, 6 pharmacists, 1 MD, 10 RNs, 3 LPNs, 21 students, 6 CNAs and 3 other. Attendees came from 5 different counties including Boone, Carroll, Marion, Miller and Taney.
- ?? *Paraprofessional Education:* 3 programs were offered in Benton County with a total of 18 attendees from Benton County.
- ?? *Community and Senior Education:*
 - ??1 program was offered in Newton County with 5 attendees
 - ??3 programs were offered in Carroll County with 48 attendees.
 - ??1 program offered in Madison County with 14 attendees.
 - ??3 programs offered in Marion County with 22 attendees.
 - ??1 program offered in Newton County with 6 attendees.
 - ??3 programs offered in Boone County with 19 attendees.
 - ??2 programs offered in Baxter County with 26 attendees.

Bella Vista

- ?? *Paraprofessional Education:* 3 programs were offered in Benton County with 18 attendees from Benton County.
- ?? *Community and Senior Education:* A total of 6 programs were offered in Benton County with a total of 115 attendees from Benton County. 2 programs were offered in Washington County with a total of 38 attendees from Washington County.

South Arkansas Center on Aging (SACOA):

- ?? *Health Professional Education:* 2 programs were offered in Union County with a total of 105 health professional attendees. These included: 27 pharmacists, 33 RNs, 25 MDs, 7 PTs, 1 respiratory therapist, 5 LCS, 2 Administrators and 5 other.
- ?? *Student Offerings:* 25 generic RN students, 16 BSN RN students, 8 LPN students and 1 Outreach Specialist Student rotated through the SACOA during this past quarter.
- ?? *Paraprofessional Education:*
 - ??3 programs were offered in Bradley County with a total of 47 attendees from Bradley County.
 - ??2 programs offered in Ashley County with a total of 89 attendees from both Ashley and Bradley Counties.
 - ??2 programs offered in Ouachita County with a total of 37 attendees from Ouachita County.
 - ??3 programs offered in Dallas County with a total of 34 attendees from Dallas and Ouachita Counties.
- ?? *Individual Senior Education Contacts:* 448 individual senior educational contacts were made during the last quarter.
- ?? *Community Education:*
 - ??26 programs were offered in Union County with 549 attendees.
 - ??2 programs were offered in Columbia County with 35 attendees.
 - ??2 programs were offered in Ashley County with 57 attendees.
 - ??2 programs were offered in Bradley County with 15 attendees from Bradley and Union Counties.
 - ??2 programs were offered in Ouachita County with 46 attendees from Ouachita and Union Counties.

Texarkana Regional Center on Aging (TRCOA):

- ?? *Health Professional Education:* 3 programs were offered in Miller County with 69 professionals attending from Bowie, Miller and Cass Counties. These included 12 social workers, 24 RNs, 27 LVN/LPNs, 2 PT/OT, 1 Psych, 2 Nursing Home Administrators and 1 Nurse Practitioner.
- ?? Both the Education Director and the Nursing Educator continue to participate in the AR-GEMS continuing education in geriatrics program sponsored by the AGECE.
- ?? *Student Offerings:* 1 AHEC resident and 6 BSN nursing students rotated through the SACOA Health Center during October, November and December of 2003.
- ?? *Individual Senior Education Contacts:* 47 individual educational contacts were made with seniors from Bowie, Miller, Howard, Little River, Sevier and Hempstead Counties.
- ?? *Community Education:*
 - ??1 program offered in Nevada County with a total of 41 attendees from Nevada County.
 - ??4 programs offered in Bowie County with a total of 44 attendees from both Bowie and Miller Counties.
 - ??1 program offered in Little River County with a total of 34 attendees.
 - ??2 programs offered in Sevier County with a total of 24 attendees.
 - ??1 program offered in Miller County with a total of 17 attendees from Miller, Bowie and Little River Counties.
 - ??1 program offered in Howard County with a total of 26 attendees from Howard and Hempstead Counties.
 - ??1 program offered in Hempstead County with 11 attendees from Hempstead County.

Center on Aging Northeast (COA Northeast):

- ?? *Health Professional Education:*
 - ??6 programs were offered in Craighead County with a total of 334 health professional attendees. These included: 32 MDs, 11 CNAs, 10 PTs, 40 RNs, 25 LPNs, 13 LSWs, 3 Pharmacists, 99 students, 1 dental, 14 dietetics, 4 APNs, 3 other, and 79 unknown.
 - ??2 programs were offered in Lawrence County with a total of 22 health professionals attending. These included: 10 RNs, 4 LPNs, 3 APNs, 2 Pharmacists, 1 MD and 2 LSWs.
 - ??3 programs were offered in Clay County with a total of 44 health professionals attending. These included: 13 RNs, 15 LPNs, 2 APN, 8 CNAs and 6 unknown.
 - ??1 program was offered in Cross County with a total of 14 health professionals attending. These included: 3 RNs, 9 LPNs and 2 unknown.

Arkansas Aging Initiative *continued*

- ?? programs were offered in Independence County with a total of 36 health professionals attending. These included: 2 RNs, 5 LPNs, 4 CNAs, 14 HCAs, 1 other and 10 unknown.
- ?? programs were offered in Greene County with a total of 49 health professionals attending. These included: 24 RNs, 15 LPNs, 1 PT, 2 LSW, 5 Nursing Home Administrators, 1 Dietetic and 1 CNA.
- ??1 program was offered in Sharp County with 9 health professionals attending. These included 1 RN and 8 LPNs.
- ?? *Student Offerings:* 3 MSN and 4 BSN RN students rotated through the Senior Health Clinic as well as 1 student in Pharmacy and 14 ASU students.
- ?? *Individual Senior Education Contacts:* 63 individual senior educational contacts were made during this past quarter
- ?? *Community Education:*
 - ??11 programs were offered in Craighead County with a total of 259 attendees from Craighead, Randolph, Poinsett, Greene, Lawrence, Fulton, Cross and Jackson Counties.
 - ??1 program was offered in Cleburne County with 37 attendees from Cleburne, White and Van Buren Counties.
 - ??1 program was offered in Jackson County with 13 attendees from Jackson County.
 - ??1 program was offered in Lawrence County with 13 attendees from Craighead, Lawrence and Randolph Counties.
 - ??1 program was offered in Mississippi County with 19 attendees from Mississippi and Missouri Counties.

South Central Center on Aging (SCCOA):

- ?? *Health Professional Education:*
 - ??6 programs were offered in Jefferson County with 43 healthcare professionals attending. These included: 10 RNs, 19 LPNs, 4 Dieticians, 1 CTRS, 1 LSW, 1OT, 1 Activity, 2 students, 2 CNAs and 2 other.
 - ??2 programs were offered in Drew County with a total of 12 attendees. These included 4 RNs and 8 LPNs.
 - ??1 program was offered in Saline County with a total of 18 attendees from Saline, Hot Springs and Garland Counties. These included 8 RNs and 10 Pharmacists.
 - ??1 program was offered in Garland County with a total of 97 attendees from Garland, Hot Springs and Clark Counties. These included 44 Pharmacists, 40 RNs and 13 unknown.
 - ??1 program was offered in Cleveland County with 1 RN attending.
- ?? *Student Offerings:* 16 LPN to RN students, 2 RN to BSN students, 18 RN students, 57 Physicians, 1 LSW and 4 med students rotated through the Senior Health Clinic and the senior educational center.
- ?? *Paraprofessional Education:*
 - ??2 programs were offered in Drew County with 52 attendees.
 - ??1 program was offered in Jefferson County with 49 attendees.
 - ??1 program was offered in Cleveland County with 10 attendees.
- ?? *Community and Senior Education:*
 - ??19 programs were offered in Jefferson County with a total of 586 attendees from Jefferson, Cleveland, Drew, Lincoln, Grant, Desha and Pulaski Counties.
 - ??3 programs were offered in Drew County with 60 attendees from Chicot and Drew Counties.
 - ??1 program was offered in Lincoln County with 6 attendees.

Delta Center on Aging:

- ?? *Health Professional Education:* 3 programs were offered for Health Professionals with a total of 20 attendees from Crittenden, St Francis, Cross and Monroe Counties. These included: 1 MD, 14 RNs, 1 APN, 2LPNs, 1 LSW and 1 BS.
- ?? *Student offerings:* 2 RN students rotated through the Senior Education Center.
- ?? *Paraprofessional Education:* 11 programs were offered for paraprofessionals with a total of 52 attendees from Crittenden, Chicot and Desha Counties.
- ?? *Individual Senior Educational Contacts:* 134 individual senior educational contacts were made during the last quarter.
- ?? *Community Education:*
 - ??13 programs were offered in Crittenden County with a total of 273 attendees.
 - ??18 programs were offered in Phillips County with a total of 200 attendees.
 - ??7 programs were offered in Monroe County with a total of 79 attendees.

Fort Smith Area Center on Aging: This site continues to develop. A new Educational Director has been hired and will begin work in mid-January.

- ?? *Health Professional Education:* 8 health professional educational programs were offered in Sebastian County with a total of 117 attendees. These included: 105 MDs, 4 medical students and 8 RNs.
- ?? *Paraprofessional Education:* 3 programs were offered in Sebastian County with a total of 28 Certified Nursing Assistants attending.
- ?? *Community and Senior Education:* 1 program was offered in Sebastian County with a total of 350 attendees.

Arkansas Biosciences Institute

Arkansas Biosciences Institute, the agricultural and biomedical research program of the Tobacco Settlement Proceeds Act, is a **partnership of scientists** from Arkansas Children's Hospital, Arkansas State University, the University of Arkansas Division of Agriculture, the University of Arkansas, Fayetteville, and the University of Arkansas for Medical Sciences.

In accordance with the Tobacco Settlement Proceeds Act, the purpose of the Arkansas Biosciences Institute is to conduct:

- ?? **Agricultural research** with medical implications;
- ?? **Bioengineering research** that expands genetic knowledge and creates new potential applications in the agricultural-medical fields;
- ?? **Tobacco-related research** that identifies and applies behavioral, diagnostic, and therapeutic knowledge to address the high level of tobacco-related illnesses in Arkansas;
- ?? **Nutritional and other research** that is aimed at preventing and treating cancer, congenital and hereditary conditions, or other related conditions; and
- ?? **Other areas of developing research** that are related or complementary to primary ABI-supported programs.



Program Progress

ABI works to foster and support **collaborative research projects**, where researchers from the ABI institutions work together on joint research projects. For the 2002-2003 fiscal year, approximately 31% of ABI's funding supported collaborative research by teams of scientists from two or more ABI institutions. ABI-supported researchers attended the second annual ABI Fall Research Symposium on October 7. Approximately 120 researchers and other interested

participants attended the symposium to review ABI-supported agricultural and biomedical research, discuss similar research interests, and learn about the latest research on the treatment of nicotine addiction.

Human health research projects highlighted at the symposium stressed the importance of continued long-term research. Updates on current ABI-supported research included:

- ?? Treatment of Asthma
- ?? Cardiovascular Effects of Nicotine and Ephedra
- ?? Cancer Vaccines
- ?? Antioxidant Properties of Foods
- ?? Measuring Exposure to Tobacco Smoke

Over twenty scientists presented updates on their ABI-supported research during the symposium's interactive poster session. During the session, researchers were able to discuss common research interests that might lead to future research collaborations. Research topics included:

- ?? Effects of Nicotine on Pancreatic Cells
- ?? Congenital Heart Defects
- ?? Oral Nicotine Consumption
- ?? Therapeutic Antibodies from Plants
- ?? Benefits of Genetically Modified Crops

ABI-supported researchers heard from an outside expert on tobacco addiction. Dr. Dorothy Hatsukami, professor at the University of Minnesota and Director of the Tobacco Use Research Program, provided updates on her research on current pharmacological treatments for tobacco addiction. Her research focused on addiction treatments such as nicotine replacements and antidepressants as effective ways to quit smoking.

Research measurements, in response to the program measures and markers of the RAND Health program evaluation, have been expanded to include the number of publications, grants submissions, patent applications, scientific meeting or conference presentations, and service on scientific review groups and editorial review boards. The ABI annual report, which will be available later this month, outlines the research measures required by the Tobacco Settlement Proceeds Act and the ongoing program evaluation. Highlights of ABI research progress for 2002-2003 include:

- ??82 grants received related to ABI-supported research for \$20.9 million
- ??93 publications, including journal articles, book chapters, books
- ??6 patent applications filed or received
- ??3 clinical trials research
- ??149 presentations to scientific meetings/ conferences
- ??58 grants submitted, with notification pending
- ??60 serve on scientific review groups
- ??64 serve on editorial review boards

Arkansas Biosciences Institute *continued*

The **ABI Science and Industry Advisory Committees** met for the first time in October. The Advisory Committees, as outlined in the Tobacco Settlement Proceeds Act, are composed of distinguished, knowledgeable persons in the fields of science and industry and serve as resources for the ABI Board. The committees have been asked to provide advice and recommendations on potential areas for new research; for strengthening on-going research, for promoting ABI research and disseminating information to the public; and for facilitating research results into commercial, alternate technological, and other applications. Advisory Committee members attending this first annual meeting included:

- ??Dr. James Giovannoni, Research Molecular Biologist – Cornell University

??Dr. Mary Good, Dean – UALR College of Information Science and Systems Engineering
 ??Dr. Rowena Matthews, Distinguished Professor of Biological Chemistry – University of Michigan
 ??Dr. Edwin Anderson, Coordinator for Laboratory Automation – Pioneer Hi-Bred International
 ??Dr. Barry Holtz, Senior Vice President – Large Scale Biology Corp.
 ??Dr. Kathy Brittain White, President – Horizon Institute of Technology

In their report to ABI, the advisory committee members commended the State of Arkansas and the five member institutions for using tobacco settlement proceeds for human health research and to advance Arkansas's agricultural and biomedical fields. The committee members recommended that ABI target and develop research areas where the State will be top tier in attracting researchers, clinicians, and teachers; encourage multi-discipline research collaborations; and, identify possible commercialization projects supported with ABI funding.

College of Public Health (COPH) (University of Arkansas for Medical Sciences)

The mission of the College of Public Health (COPH) at UAMS is to improve health and promote well being of individuals, families, and communities in Arkansas through **education, research, and service**. The COPH has elected to address this mandate through a community-based health education model.

The COPH will improve health and well being of Arkansans by:

- ?? Training and re-training a professional public health workforce capable of further disseminating effective community programs.
- ?? Training healthcare and public health practitioners in prevention methods through offering continuing education programs and through partnerships in the delivery of model programs;
- ?? Contributing to the development of linkages among graduating students, state agencies, local organizations, healthcare practitioners, and communities to help align, coordinate, and implement effective prevention programs.
- ?? Conducting community-based research that is Arkansas focused and based on Arkansas needs.



Program Progress:

Education Goal: Increase the number of communities in which citizens receive public health training (Initiation)

?? **Student Expansion:** 177 students registered for the Fall 2003 – 2004 semester. Student demographics follow: 142 (80%) of the students are female; 152 of the students are Part-Time; 32% are African-American; 6% Asian; 60% Caucasian; 1% Hispanic; and 1% Native American. Student age range covers a wide distribution: 31% are 20 – 29 years old; 27% are 30 – 39 years old; 27% are 40 – 49 years old; 14% are 50 – 59 years old and 1% are 60 and above. 28% of the students are from the Central AHEC region; 5% from the Northwest; 7% from the Northeast; 3% from the Southwest; 5% from the South; 3% from the Delta; 16% from South Central (Pine Bluff); 7% from North Central (Fort Smith); 18% from out of state and 8% from foreign countries. 25% of the students are Arkansas Department of Health (ADH) employees, and 16 of these ADH students are ADH Community Health Nurses funded with Tobacco Settlement funds. Community health nurses are located in the Educational Coops around the state and have taken some of their classes via videoconferencing.

- ?? **First CPH Graduate:** Suzanne McCarthy became the first student to graduate (MPH) from the CPH in December 2003.
- ?? **Faculty Development:** As of December 31, 2003, CPH has 36 full-time or FTE supported faculty. In December, Dr. Paul K. Halverson accepted an offer to become Chair of the Department of Health Policy and Management. Dr. Halverson is expected to assume his duties in June 2004. He comes to the college from the United States Department of Health and Human Services, Centers for Disease Control and Prevention, as Director of the Division of Public Health Systems Development and Research. Dr. Glen P. Mays has accepted a faculty position in the Department of Health Policy and Management as well and is expected to begin his duties in June 2004. Two additional offers are pending at this time, one to a senior and highly successful researcher in the area of community-based participatory research, an area that is highly consistent with the Mission of the College; the other is to a junior faculty member whose interests are also directed at community-based work. National searches are ongoing for a Chair of the Department of Epidemiology, a Biostatistician, a faculty member in the Department of Environmental and Occupational Health, and a faculty member in cancer epidemiology.
- ?? **Program Development:** The CPH offered 29 courses this Fall; 16 on the UAMS campus, 8 on the University of Arkansas at Little Rock (UALR) campus, and 5 on the University of Central Arkansas in Conway (UCA) campus.
- ?? **Degree Programs** now include:
- ?? Post-Baccalaureate Certificate
 - ?? MPH (generalist and specialist)
 - ?? MD/MPH; MPH/JD
 - ?? MS in Occupational and Environmental Health
- ?? **The doctoral program** has become a reality. The Doctor of Public Health (DrPH) proposal was approved by the University of Arkansas Board of Trustees in September and the Department of Higher Education in December. Three students have been accepted in the program and will begin classes in January 2004.
- ?? **Continuing Education:** The CPH has partnered with the UAMS Office of Regional Programs (ORP) to co-sponsor a variety of distance-learning based topics of public health importance. A program on “The History of TB” presented by Dr. Joe Bates, MD, Associate Dean for Public Health Practice, was held in December 2003. These programs are distributed to the hospitals that comprise the Rural Hospital Network.
- ?? **Monthly magazine column:** In December 2003, CPH faculty began providing monthly columns to the AR Municipal League magazine “City and Town”. The monthly columns offer useful advice on how municipal officials and administrators can promote better health. The December column was written by Carole Garner, Assistant Professor, Maternal and Child Health, and was entitled “Vending Machines: Add Healthy Choices”.
- ?? **American Public Health Association:** Several CPH faculty and students presented research papers/poster displays at the American Public Health Association (APHA) meeting in November 2003.
- ?? **The Health Policy/Prevention Conference** is held each Tuesday from 4 pm – 5 pm. The Arkansas Center for Health Improvement (ACHI) and the Arkansas Department of Health (ADH) are conference co-sponsors. CPH faculty/guests provide relevant information related to public health policy and prevention. One-hour Continuing Education Units (CEUs) are available to Physicians, Nurses, Pharmacists, Nutritionist/Dieticians, Health Educators, CHES/CPHE, EMT’s, Sanitarian and Social Workers who attend.
- ?? **Public Health Grand Rounds** are also held each Thursday from 8 am – 9 am in the ADH Auditorium. The College participates as a co-sponsor of these grand rounds with CEUs also awarded to those who attend.
- ?? **Preaccreditation:** The Self-Study for the Council on Education for Public Health (CEPH) was completed and submitted to CEPH in August 2003 and requested modifications were completed and submitted to CEPH in December 2003. CEPH is scheduled to make a site visit to Little Rock on January 7–9, 2004. A CEPH Council meeting will be held in May 2004 to make a final decision concerning the CPH’s application for accreditation as a school of public health..

?? **New CPH building almost completed.** Office, teaching, and research space was opened in the new, six-story CPH building of the UAMS campus in September 2003. Two floors provided initial space for the College. An additional floor will be completed in February 2004. Space is available for two computer laboratories for student training and general use as well as two distance-learning classrooms.

Research Goal 1: Obtain federal and philanthropic funding

?? CPH faculty members Dr. Eddie Ochoa, MD., Assistant Dean for Minority Affairs, and Dr. Creshelle Nash, MD., Assistant Dean for Professional Relations, received a \$104,187 grant to continue the “AR Racial & Ethnic Health Disparities” research begun in 2002. The terms of the grant extend from 7-1-03 through 6-30-04. This project is a community-collaborative-based effort between CPH and the Minority Health

College of Public Health *continued*

Commission, a long-time CPH partner. Focus Groups were formed in various parts of the state and existing data retrieved to review and examine factors that contribute to racial and ethnic health disparities in Arkansas. Information resulting from this research will provide the Minority Health Commission, and other health related partners, community specific information that can be used to develop programs and/or initiatives that will help eliminate such disparities.

?? Dr. Mary K. Stewart, MD., Associate Director, Office of Community-Based Public Health, received a \$440,455 grant to continue work on the “Family Planning Waiver”. The terms of the grant extend from 7-1-2003 through 6-30-05. The Family Planning Waiver is an evaluation of a Medicaid waiver to expand family planning services to women in Arkansas with incomes up to 200% of poverty. Prior to the waiver, only women who otherwise met Medicaid income eligibility (23% of poverty), or were 60 days post partum, were eligible for family planning. The goal of this effort is to decrease unwanted births and decrease the state funds expended by the state for such births.

?? Dr. Delia West received a \$29,448 “Look AHEAD Subcontract”— \$8,710 of which constitutes indirect cost. Look AHEAD is enrolling 5,000 volunteers with type 2 diabetes who are 45 – 75 years of age and are overweight or obese at 16 clinical sites (UAMS not included) and randomizing them to either an intensive lifestyle intervention or to diabetes support and education (control group). The primary outcome is the aggregate occurrence of severe cardiovascular events including fatal and non-fatal myocardial infarctions and strokes and cardiovascular deaths over a planned follow-up period of up to 11.5 years.

Research Goal 2: A significant portion of research conducted shall be relevant to the health issues within Arkansas and/or community-based in nature

?? Improving minority health disparities in Arkansas will significantly improve the health status of our minority population.

?? The Family Planning Medicaid Waiver will provide data to determine if family planning services are/are not a beneficial program to reduce unwanted pregnancies, and is relevant to our state and nation.

?? Nowhere is the long-term risk of obesity more manifest than in its effect on type 2 diabetes. The current epidemic of diabetes in the United States in general, and in Arkansas in particular, is largely attributable to the increased incidence of obesity. The Look AHEAD subcontract deals with diabetes, a significant obesity health issue.

Service Goal 1: CPH shall act as a resource to the General Assembly, the Governor, state agencies, and communities

?? CPH faculty are serving on the committees established by Acts 1220 and 1816 of the 84th General Assembly. These committees are examining school health care and nutrition and physical activity issues.

?? Dean Raczynski made several visits in December 2003 to talk about the CPH, what the college offered to Arkansans, and to inquire what the community needed from the college. Visits were made to AHEC faculty, staff, and interns at the Pine Bluff AHEC, the University of Arkansas at Pine Bluff (UAPB) faculty, the Delta AHEC staff in Helena, and to the Helena/West Helena Rotary and Chamber of Commerce in Phillips County.

?? In November 2003, the College of Public Health coordinated a public hearing on “What is happening in the public health arena in Clay, Lawrence, Greene & Randolph Counties” in Paragould Arkansas for the House and Senate Interim Committee’s on Public Health, Welfare and Labor. Dr. Raczynski spoke about the COPH and the greatest health threats to Arkansas in the 21st century. Dr. Boozman, Director of the AR Department of Health, and Ann Bynum, Associate Director of AHEC also presented at this public hearing. Over 100 community people were in attendance.

Service Goal 2: COPH shall collaborate and partner with other agencies, organizations, etc. on health related issues when feasible. (Consultation and Analysis/Collaboration and leveraging)

?? COPH staff are visible partners with the Arkansas Cancer Coalition, Arkansas Oral Health Coalition, Arkansas Minority Health Commission, and the Arkansas Department of Health.

Major Challenges this quarter/Assistance needed by RAND:

No major challenges have occurred this quarter. RAND and COPH staff are in communication regarding information needed for the next RAND evaluation period – July 1 – December 31, 2003.

Delta Area Health Education Center (Arkansas AHEC Program)

Primary Goal and Overview

The Delta Area Health Education Center (Delta AHEC) was established by the Tobacco Settlement Proceeds Act (July 1, 2001) and it is the intent of the Act that the University of Arkansas for Medical Sciences (UAMS) establish a new Delta Area Health Education Center to serve the following counties: Crittenden, Phillips, Lee, St. Francis, Chicot, Monroe, and Desha. The new Delta AHEC shall be operated in the same fashion as other facilities in the UAMS-AHEC program including training students in the fields of medicine, nursing, pharmacy, and various allied health professions, and offering medical residents specializing in family practice. The training shall emphasize primary care, covering general health education and basic medical care for the whole family. The program shall be headquartered in Helena with offices in Lake Village and West Memphis.



Program Progress

During the last quarter, an additional site has been opened in Brinkley under the facilitation of a certified health education specialist. The site has been established for nurse recruitment and the initiation of health promotion programs and activities within the community. These programs include geriatric education and support groups, health screenings for consumers, the establishment of a minority pen pal program between secondary students and primary healthcare professionals, as well as, health education and physical check ups for those employed in the community's industries and businesses. Additionally, the Helena Regional Medical Center donated \$25,000 to the Delta AHEC for continued support of the health education and health promotion programs.

Goal I: Increase access to quality healthcare through the composition, distribution, and appropriate preparation of a culturally competent health professional workforce.

Prepare health care professionals to support primary healthcare:

- ?? 48 Nursing courses provided via internet to nurses seeking a Bachelor of Science in Nursing
- ?? 30 Registered Nurses preparing for Bachelor of Science in Nursing
- ?? 2 Students recruited to train in the Delta as a Registered Nurses
- ?? 32 Delta Nurses receiving instruction towards Master of Science in Nursing

Provide support services and Continuing Education for area health professionals and health professional students:

- ?? 18 physicians receiving medical education training via video conferences
- ?? 27 pharmacists receiving educational training via video conferences
- ?? 98 allied health professionals receiving educational training via video conferences
- ?? 79 nurses receiving continuing medical education via video conferences
- ?? 53 continuing medical education conferences provided
- ?? 167 continuing medical education hours provided to all qualified health professionals

Provide professional support materials:

- ?? 5 health professionals trained in library/internet services

- ?? 9 health professional students trained in library/internet services
- ?? 6 educational videos purchased and distributed in medical libraries in Helena, Lake Village and West Memphis
- ?? 40 journals and texts purchased for medical libraries in Helena, Lake Village, and West Memphis

Promote the access to quality healthcare through the distribution of the health professional workforce:

- ?? 1 physician retention plan developed

Increase the number of minority/disadvantaged enrollees in the Delta:

- ?? 48 minority Registered Nurses recruited and admitted to the Bachelor of Science in Nursing program
- ?? 195 minority secondary students trained in understanding/pursuit of health careers

Increase the number of Delta graduate and/or program completers:

- ?? 2 fourth year medical students recruited for Senior Selective Rotation
- ?? 2 residents recruited from the Family Practice Residency Program to serve one month OB/GYN rotations

Delta AHEC continued

Increase the number of graduates or program completers practicing in underserved areas:

- ?? Number of physicians who practice in the Delta increased by 3
- ?? 25 trainings conducted for Community Health Workers
- ?? 121 Community Health Workers trained

Acquaint minority and/or disadvantaged youth to health careers.

- ?? 35 programs offered to 8-12 year olds on health careers
- ?? 3,875 students 8-12 years old participated in summer programs that promote health careers
- ?? 576 student participants in after school health career programs

Goal II: Increase the capacity of participation in culturally sensitive health promotion and health education programs.

Expand health promotion and health education programs targeting CVD, Stroke, Asthma, Diabetes, Sickle Cell, Tobacco Cessation and Prevention:

- ?? 901 people screened for CVD, Diabetes, and Sickle Cell
- ?? 48 health screening events conducted
- ?? 330 CVD programs presented
- ?? 33 programs conducted on diabetes prevention and control.
- ?? 3 stroke programs conducted
- ?? 3,875 students participated in Kids for Health program/comprehensive health education includes tobacco prevention education
- ?? 369 participants 18 years and older receiving tobacco prevention and cessation education
- ?? 24 smokers referred to patient educator to provide individualized tobacco cessation intervention
- ?? 4 medical consults were conducted via internet/video
- ?? 47 smoking cessation programs conducted to 18 years and older consumers
- ?? 96 Sickle cell support groups facilitated
- ?? 5 Diabetes support groups facilitated
- ?? 80 Participants in Sickle Cell programs
- ?? 346 Tobacco prevention programs conducted in schools
- ?? 1,810 elementary and secondary students participated in smoking prevention classes

Increase the number of citizens who participate in Delta AHEC programs:

- ?? 18 billboards promoting Delta AHEC services
- ?? 56 news articles on health education programs and the Delta AHEC published
- ?? 27 Public Service Announcements on health promotion and the Delta AHEC provided
- ?? 2,542 health promotion flyers distributed by the Delta AHEC offices

Improve health behaviors in regards to physical activity and nutrition:

- ?? 81 Tai Chi participants
- ?? 471 aerobic participants
- ?? 63 diabetes patients referred to patient educator for one-on-one intervention
- ?? 43 clients referred to nutrition counselor and registered dietician for individualized assistance
- ?? 257 children participating in obesity prevention and weight control programs
- ?? 81 adolescents participating in obesity prevention and weight control programs

Improve health behaviors related to teen pregnancy prevention and parenting skills:

- ?? 71 teens participating in teen pregnancy prevention programs
- ?? 129 participants in pre-natal program
- ?? 473 participants in parenting classes

Leveraging and Collaborations since the initiation of the Delta AHEC as of July 2001:

- ?? \$819,000 Community Access Project
- ?? \$700,000 Health Education Training Center/HRSA
- ?? \$70,000 Southern Rural Access Program
- ?? \$25,000 Legacy for Smoking Cessation
- ?? \$33,000 Arkansas Department of Health for Teen Pregnancy Prevention
- ?? \$25,000 NIOSH for Farm Safety
- ?? \$18,000 Susan G. Komen for Breast Cancer Health
- ?? \$14,000 March of Dimes for Pre-natal Education
- ?? \$287,436 National Heart, Lung, and Blood Institute for Cardiovascular Education
- ?? \$70,000 from Arkansas Blue Cross and Blue Shield for Health Education and Screening
- ?? \$230,000 Center on Aging/UAMS
- ?? \$25,000 Helena Regional Medical Center

Future Plans/Activities:

In the Initiated Tobacco Settlement Act, it charges the Delta AHEC to "... be operated in the same fashion as the other facilities in the UAMS AHEC program including training for students in the fields of medicine, nursing, pharmacy, and various allied health professions, and offering medical residents specializing in family practice." In order to meet this legislative standard, the Delta AHEC in Helena has acquired architectural drawings in the process to secure a permanent building to house the Delta AHEC and its future clinic.

Arkansas Department of Health Tobacco Prevention and Education Programs (TPEP)

The Tobacco Prevention and Education Program (TPEP) introduced the Stamp Out Smoking (SOS) campaign to educate Arkansans about the dangers of tobacco use. Using the Center for Disease Control's (CDC) Best Practice Guidelines, a plan was developed to reduce disease, disability and death related to tobacco by preventing the initiation of tobacco use

among young people; promote quitting among young people and adults; eliminating exposure to second-hand smoke and identifying and eliminating the disparities related to tobacco use and its effects on population groups.

Program Progress

Community Programs

Thirty community program grants were funded July 1, 2003 to build coalitions with diverse partners; provide education on the harmful effects of second-hand-smoke; reduce youth access; decrease advertising and promotion of tobacco products and promote the utilization of cessation resources.

Each recipient of funding is monitored on the progress of programmatic activities and use of funding on a quarterly basis. During the first quarter (7/1/03 – 9/30/03), the coalitions were primarily planning, building membership and providing training on tobacco prevention and education issues.

The coalition coordinators held meetings with community partners and coalition members to review past progress and plan future activities. Many coalitions disseminated information on the effects of secondhand smoke, reviewed current status of local tobacco-related policies and recognized local smoke-free restaurants and businesses. Also, coalition partners and members educated other organizations on the dangers of tobacco usage, cessation resources and the harmful health effects of secondhand smoke. Many of the coalitions submitted articles and news/press releases on tobacco-related issues to their local media outlets. Also, the quarterly reports indicated that coalition members attended trainings on coalition building, health-advocacy and media.

School & Youth Programs

Seventeen consortiums of school districts and/or schools were funded on July 1, 2003 to build capacity for tobacco prevention in school communities and strengthen infrastructure for tobacco prevention already in place.

Each recipient of funding is monitored on the progress of programmatic activities and use of funding on a quarterly basis. During the first quarter (7/1/03 – 9/30/03), consortiums focused on building capacity. The Consortium Coordinators and key individuals attended trainings, reviewed and purchased CDC recommended curriculum and reviewed and updated current school smoke-free policies.

The Community School Health Nurse Specialists (CSHNS) have been instrumental in the evaluation of existing school policies and development of new policies in their respective areas. Primarily, they have assisted schools in identifying gaps and/or inconsistencies in current policies and offering assistance in strengthening those policies to offer a more comprehensive, clear, and uniform policy for their school and/or area.

The CSHNS continue to offer technical assistance to local coalitions by attending coalition meetings and providing expertise and resources when needed. The nurses are instrumental in assisting local areas in gathering information regarding cessation options and curricula. The nurses also conduct presentations on tobacco prevention or curricula, as needed.

Arkansans For A Drug Free Youth (ADFY) assisted in the successful planning and execution of the state's annual Teen Summit. ADFY's partnership with the Coalition for a Tobacco Free Arkansas has resulted, for a second year, in a program expansion of the Teen Summit to not only explore tobacco control, but alcohol prevention, as well. Consequently, the Teen Summit on Tobacco is now the Teen Summit on Tobacco and Alcohol.

ADFY has diligently worked to recruit additional youth for the statewide youth tobacco control board. The recruiting effort has resulted in a 100% increase of youth membership. ADFY has also begun preliminary steps to hire a media contractor to develop and implement the media campaign of the youth board. This contractor is scheduled to be awarded and in place by mid-February.

The current session of ADFY's Get Real About Tobacco project, facilitated at local Boys and Girls Clubs, will conclude by mid-February. During the next cycle of the program, ADFY plans to increase the effect of this program by offering it

to rural areas. The program has been successful in equipping young children with the skills necessary to resist tobacco usage.

Enforcement

Arkansas Tobacco Control Board (ATCB) enforces state laws prohibiting the sale of tobacco products to minors. For the first quarter (7/1/03 - 9/30/03) 2,253 compliance checks were completed with a 20.02% violation rate.

Tobacco Prevention & Education Program *continued*

The second quarter results will be reported the end of January 2004.

Cessation

As of December 31, 2003, the quit line has received over 12,212 calls and has enrolled 1,823 clients in to the cessation program since mid-January 2003. There was a 25.5% quit rate for those who enrolled six months ago.

The Arkansas Smoking Cessation Network (ASCN) program provides evidence-based intensive tobacco cessation services in sites that serve a large number of participants who are low socio-economic status, uninsured or Medicaid insured. These sites include the Community Health Centers (10 sites), Area Health Education Center Northwest, Conway Regional Medical Center, Fulton County Hospital, St. Mary's Regional Medical Center and White River Medical Center. The ASCN has enrolled 1,644 patients since March 2003. There is a 30% quit rate for those who have been in the program for 3 months.



Advertising, Media & Public Relations

Original, creative television ads were produced for the first time since the Arkansas campaign, Stamp Out Smoking (SOS), was launched. Three television spots were produced to target the general market and three additional spots were produced to target African-American and Hispanic audiences. In addition, original radio was also produced for all audiences.

SOS negotiated a partnership with the American Legacy Foundation, a nonprofit organization established in March 1999 as a result of the Master Settlement Agreement (MSA). The organization is dedicated to “building a world where young people reject tobacco and anyone can quit.” The partnership allows the organization to match Arkansas media dollars, adding more than \$679,774 in value to the campaign. This is equivalent to a 28 percent increase in the total campaign budget.

To date, SOS has committed to 25 sponsorships and partnerships for the 2003-04 fiscal year. Last year, these types of grassroots efforts generated more than \$1.47 million in added value to the SOS campaign. A similar return is expected this year.

In addition to the statewide sponsorships, CJRW also is coordinating numerous other grassroots efforts including: school kits for coaches, science and health teachers in select schools across the state; an anti-smoking coloring contest for elementary students; an anti-smoking essay contest for high school students; educational kits for select library summer reading programs; and anti-smoking speakers bureau kits to Toastmasters organizations.

In conjunction with the November 20 Great American Smokeout, more than 15,000 letters were distributed to Arkansas chief executive officers. The letter encouraged business leaders to declare their workplace smoke-free, if it is not already. The letter also gave contact information to request a smoke-free cling for your business window. To date, more than 300 clings have been distributed.

Minority Initiatives

University of Arkansas at Pine Bluff (UAPB), Minority Initiative Sub-Recipient Grant Office (MISRGO) issued 24 minority community-based grants for FY 04 for the purpose to educate the public on tobacco's danger and on the harmful

effects of second-hand-smoke; reduce youth access; decrease advertising and promotion of tobacco products and promote the utilization of cessation. Recently, site visits have been conducted on these projects with a finding that all are working vigorously within their communities to combat tobacco use.

Activities are being held on a regular basis that involves youth, faith-based organizations, community organizations, public schools, health educators and citizens. The Great American Smoke-Out Day (November, 2003) was celebrated throughout the state of Arkansas and all grantees have held rallies and/or festivals and have been able to get excellent participation from citizens and businesses. Coalition teams are strong with diverse partners and are participating heavily with their designated projects. The projects are utilizing the media via public service announcements, newspaper ads, television promos, distribution of flyers, posters, letters and various other materials that serve to educate the general public of tobacco's danger.

The MISRGO is gearing up for its first annual tobacco conference to be held February 11-12, 2004 at the Pine Bluff Convention Center, Pine Bluff, Arkansas. The conference is entitled Clearing the Air for Communities of Color with the theme of “Breaking Tobacco’s Grip”. The conference focus is to showcase best practices relative to the fight against tobacco use, to engage underserved minority communities and to increase the involvement of minority communities in combating tobacco use.

The evaluation of the MISRGO is underway and evaluator surveys will be going out to Sub-Grantees shortly. One of the goals of the Minority Initiative Sub-Recipient Grant Office is to serve as a primary source of technical and other assistance to Sub-Grantees. The survey will assist in that goal by allowing evaluators to identify areas of need that Sub-Grantees may have in common. The vision of the MISRGO, ‘to change society’s norms regarding tobacco use’, is clearly becoming reality, making a positive contribution toward enhancing the health of all Arkansans.

Surveillance & Evaluation

The Gallup Organization, our program evaluator, is working on the programs next annual report. This report should be out by February 2004. Gallup has developed and will conduct a survey concerning smoking policies on Arkansas college campuses as well as a survey to determine Arkansas restaurant owners/managers opinions on smoke-free restaurants. Gallup continues to provide technical assistance and training to the TPEP team, community coalitions and school programs.

Statewide Partners

Coalition for a Tobacco Free Arkansas assisted in the successful planning and execution of the state's annual Teen Summit. Also, the first of four regional trainings for youth took place in September. The youth trainees will become empowered to train others in tobacco control and will become informed community advocates for tobacco prevention.

The Arkansas Cancer Coalition held Cancer Summit IV on Cancer and Health Disparities in October 2003. Also, the coalition is designing a newsletter and is providing technical assistance to other cancer coalition and community partners.

Medicaid Expansion Initiatives

The goal of the Medicaid Expansion program is to create a separate and distinct component of the Arkansas Medicaid Program that improves the health of Arkansans by expanding health care coverage and benefits to specific populations.

Program Progress

Pregnant Women Expansion

?? Increased the income eligibility limit from 133% to 200% of the federal poverty level

?? Program implemented November 1, 2001

?? Current number of program eligibles –

October 4,122

November 4,250

December 4,380

Hospital Benefit Coverage

?? Increased the number of benefit days from 20 to 24 and decreased the co-pay on the first day of hospitalization from 22% to 10%.

?? Program implemented November 1, 2001

Age 19 to 64 Expansion

?? Incrementally covers 19 to 64 age group with a limited benefit package

- ?? Population and limited benefit package defined and submitted to actuarial firm for cost analysis
- ?? Section 1115 Waiver Concept Paper developed and submitted to CMS on 7/8/02
- ?? Federal approval to submit Section 1115 Waiver on hold due to CMS concerns regarding cost neutrality

65 and Over Expansion (AR Senior)

- ?? Incrementally increase coverage to the 65 and over population
- ?? Implemented November 1, 2002 at 75% of QMB Level
- ?? Increased to 80% of QMB Level effective January 1, 2003
- ?? Current program participants –

| | |
|----------|-------|
| October | 3,515 |
| November | 3,559 |
| December | 3,600 |

**Expenditures for October 1, 2003 through
December 31, 2003 and Proportion of Leveraged Medicaid Dollars**

| | |
|--------------------------|--------------------|
| Tobacco Settlement Funds | \$668,967 |
| Federal Medicaid Funds | <u>\$2,320,161</u> |
| Total | \$2,989,128 |

Major Challenges for Medicaid Expansion Program

The Center for Medicare and Medicaid Services (CMS) has withheld approval of the Department's Section 1115 Waiver Concept Paper due to the assumptions and calculations used to justify compliance with the cost neutrality requirement. The proposed age group, 19 to 64 year olds, is not a typical Medicaid coverage group unless they meet other disability or medically needy eligibility criteria. If the state is unable to successfully

Medical Expansion Initiatives *continued*

negotiate a cost neutrality formula for this population with CMS, then we will be unable to implement the proposed Age 19 to 64 Medicaid Expansion Initiative.

Minority Health Initiatives

The Arkansas Minority Health Initiative mandates that the Arkansas Minority Health Commission (AMHC) establish and administer screening, monitoring and treatment of hypertension, strokes and other disorders that disproportionately affect the minority groups of Arkansas.

The goals of the Arkansas Minority Health Commission are:

- ?? to increase awareness of hypertension, strokes and other disorders that are disproportionately critical to minorities by utilizing different approaches that include but are not limited to the following: advertisements, distribution of educational materials and providing medication assistance materials for high risk minority populations.
- ?? to provide screening or access to screening for hypertension, strokes and other disorders that are disproportionately critical to minorities and to provide this service to any citizen within this state regardless of racial/ethnic background.
- ?? to develop intervention strategies to decrease hypertension, stroke and other disorders and their complications that disproportionately target minority populations including but are not limited to the following: smoking cessation, health education programs, weight loss, promoting a healthy lifestyle and treatment of hypertension with cost-effective medications as well as case management for patients in these programs.

Program Progress

Goal 1: To increase hypertension awareness

- ?? Conducted site visits with the three participating community health centers in Chicot, Lee and Crittenden counties, to evaluate and improve data collection for the screening and treatment intervention of the Comprehensive Hypertension and Stroke Risk Assessment Program.
- ?? Activated procedures to make the implementation of the screening and treatment intervention more uniform among the three (3) participating counties in the Comprehensive Hypertension and Stroke Risk Assessment Program.
- ?? Will submit a description of the planned research component of the Comprehensive Hypertension and Stroke Risk Assessment Program to the University of Arkansas for Medical Sciences for review by the Institutional Review Board. This includes development and analysis of the hypertension database mandated by the ATSC legislation.
- ?? Will advertise a position for an Advanced Nurse Practitioner/Health Education/Project Coordinator within the next three months. This person will assist in development and implementation of the current Comprehensive Hypertension and Stroke Risk Assessment Program.
- ?? Highlighted hypertension, strokes, diabetes and other disabilities that target minority populations in radio, print, and television ads.
- ?? Started working with Al Rasheed, Ph.D. to initiate the Arkansas Collegiate Initiative Study which is designed to test the knowledge retention of students using the Minority Health Today television show.
- ?? Developed television advertisements highlighting hypertension, strokes and other disorders that disproportionately affect minorities and also advertisement aimed at increasing awareness of the Arkansas Minority Health Commission
- ?? Commenced development of a quarterly Arkansas Minority Health Commission newsletter to highlight hypertension, strokes and other disorders that disproportionately affect minorities, as well as informing the public of upcoming health fairs and screening opportunities.

?? Started working with Al Rasheed, Ph.D. on the Arkansas Healthy Lifestyle Survey for the entire state of Arkansas, with special emphasis on south Arkansas. The purpose of the Arkansas Healthy Lifestyle Survey is to provide an overview of the current status of healthy lifestyle choices among the target populations. The target populations for this study will be cancer free black, Hispanic and rural white residents over the age of 21 years.

Goal 2: To provide screening or access to screening for hypertension, strokes and other disorders that disproportionately affect minorities

?? Acted as primary organizer for 12 separate health fairs

?? 1,803 attendees

?? 4549 pieces of health related literature given out

?? Co-sponsored 22 health fairs and have given out health information regarding hypertension, strokes and other disorders that disproportionately affect minorities.

?? 6,086 attendees

?? 1,931 screenings (745 Blood Pressure Checks, 45 Breast Exams, 482 Glucose Checks, 167 BMI, 492 Cholesterol Checks)

?? 7,330 pieces of health related literature given out

?? Provided one quarterly health screening and forum in Benton County.

?? 250 + attendees

?? 338 screenings (87 Blood Pressure Checks, 82 Glucose Checks, 62 Cholesterol Checks, 107 BMI)

?? 725 pieces of health related literature were given out

?? Provided health related information to call-ins regarding but not limited to hypertension, strokes and other disabilities that disproportionately target the minority populations, as well as any other citizen living in this state with the same information.

?? Submitted a grant proposal to the Department of Health and Human Services to support and implement the Eating and Moving for Life Program in three (3) additional counties

?? Submitted a letter of solicitation to Southwestern Bell for funds to buy blood pressure cuffs to distribute throughout the state.

Goal 3: To develop intervention strategies to decrease hypertension, strokes and other disabilities

?? Improved data collections procedures for all three (3) participating counties in Eating & Moving for Life.

?? 168 Enrolled with completed screens

?? 31 Enrolled and waiting to be screened

?? 199 Total Enrollment

?? Completed analysis of secondary data and focus group data for the Arkansas Racial & Ethnic Health Disparity Study.

?? Presented the Arkansas Racial & Ethnic Health Disparity Study at the November 18, 2003 131st Annual Public Health Association meeting.

?? Final report on the Arkansas Racial & Ethnic Health Disparity Study expected to be presented at January Arkansas Tobacco Settlement Commission meeting.

?? Final report on the Arkansas Racial & Ethnic Health Disparity Study to be submitted January 30, 2004.

?? Developed a follow-up system for contacting health fair participants with abnormal results using follow-up letters and phone calls.

?? Submitted a grant proposal to the Department of Health and Human Services to support and implement the Eating and Moving for Life Program in three (3) additional counties

?? Submitted a letter of solicitation to Southwestern Bell for funds to buy blood pressure cuffs to distribute throughout the state.

?? Drs. Nash and Ochoa have developed a synthesis of minority health problems and needs in consultation with RAND.



Arkansas
Minority
Health
Commission

RAND Evaluation

The final quarterly calls of the first year of the process evaluation are being held with the programs in January 2004, and preparations are underway for a second round of site visits to the programs in April. The first report of data for the indicators used to monitor program activity trends will be submitted to the Commission at its January meeting.

A report with baseline information on a set of overall outcome indicators was presented to the Commission at its November meeting. The data for these measures will be updated regularly to build trend information and begin to identify possible impacts of the funded programs on the outcomes being tracked.

The site visits with the funded programs will be performed on the following schedule:

| | |
|----------------------------------|-----------------|
| College of Public Health | April 6 and 7 |
| Tobacco Prevention and Cessation | April 8 and 9 |
| Arkansas Aging Initiative | April 12 and 14 |
| Medicaid Expansion | April 13 |
| Delta AHEC | April 15 and 16 |
| Minority Health Initiative | April 20 and 21 |
| Arkansas Biosciences Institute | April 22 and 23 |

Work began in January on obtaining data from the funded programs for the analysis of budgets and spending, and we expect to obtain the data in the first quarter of 2004. The analysis of spending through December 2003 will be completed by the end of May.

Preparation began in January on the first biannual evaluation report. This report will present the results of the process and outcome evaluations on the funded program activities from startup through the first quarter of calendar year 2004, and it will consider policy issues and options identified from RAND's evaluation analysis.

REQUEST FOR APPLICATIONS

ARKANSAS TOBACCO
SETTLEMENT COMMISSION
2004 COMMUNITY GRANTS: OPTIMIZING THE HEALTH OF ARKANSAS

DEADLINES

Letter of Intent to Apply
Friday, January 30, 2004

Grant Applications Due:
Friday, March 19, 2004
No later than 4:00 p.m.

Mail applications to:
Attn: Chiquita Munir, Executive Director
Arkansas Tobacco Settlement Commission
101 East Capitol Avenue, Suite 460
Little Rock, AR 72201
(501) 683-0074
(501) 683-0078 fax

To obtain an application, visit our website at www.artsc.org. To be added to the ATSC mailing list for future competitions and other funding opportunity notices, click on **Community Grants** in the left column, then click on

How to Apply

and finally

Request an Application

Fill out the request form
and submit.



| Arkansas Tobacco Settlement Commission | | |
|---|---|--|
| Executive Director: Chiquita Munir Administrative Assistant: Roberta Weathers | | |
| Bill Lefler, D.D.S., F.A.C.P. Major General USA (RET) Chairman <i>(Citizen selected by the Governor)</i> | John Ahlen, Ph.D. Director, Arkansas Science & Technology Authority | Omar Atiq, M.D. Director, AR Cancer Institute <i>(Healthcare professional selected by Senate President Pro Tem)</i> |
| Susan Barrett President and CEO, St. Mary's Hospital <i>(Healthcare professional selected by the Speaker of the House of Representatives)</i> | Linda Beene, Ed.D. Director, Arkansas Department of Higher Education | Fay Boozman, M.D., M.P.H. Director, Arkansas Department of Health |
| Anthony Fletcher, M.D. Cardiologist, Cardiology and Medicine Clinic <i>(Citizen selected by the Attorney General)</i> | Kurt Knickrehm Director, Arkansas Department of Human Services | Ray Simon Director, Arkansas Department of Education |

The ATSC quarterly report is compiled by the Arkansas Tobacco Settlement Commission, 101 East Capitol Avenue, Suite 460, Little Rock, AR 72201.
Phone: (501) 683-0074 Fax: (501) 683-0078

Your Tobacco Settlement Dollars at Work